EXHIBIT 5 DATE 2/9/2011 HB

l-155 Balance	e Sheet (Fur	nd 0259	7)					İ
Elias he ika								
Beginning Fund Balance	\$	Actual 14,622,449	•	Est 18,156,676	\$	Est 15,461,632	•	Ed 8,019,138
Tax Estimate	\$	9,423,291	•	10,067,080	5	10,431,015	•	10,761,049
BOI Interest Earnings	\$	42,672		221,774	\$	227,652		189,843
Revenue Total	\$	9,465,962	1.1	18,208,863	\$	10,658,667	5	10,930,692
HMK & MEDICAID				111				
Direct Administration	s	535,340	8	1,233,591	s	711,255	•	709.024
101-133% HMK Expansion 6-18 Years	\$	2,001,956		3,084,228	34	6,533,401		7,135,801
0-100% HMK Plus enrollment above the 46,711	\$	3,098,364		6,567,258	8	4,758,182		4,574,280
HMK Populations 175 to 250 FPL w/new groups				1,100,408	\$	5,244,170		5,620,863
02597 Budgeted Expenditures	\$	5,635,660	\$	12,860,743	s	17,247,008	\$	18,040,848
HCS Eligibility Determination		217.644		231.654		687.403		687,403
Administrative Expenditures	\$	78,231		177,170		166,753	100	166,656
Indirect Expenditures	\$	295,875	•	409,824		854,156		957,062
Expenditures Total			1					
Experiorates total	<u> </u>	5,931,535	-	12,004,108	5	18,101,164		18,897,910
Ending Fund Balance	\$	18,156,876	•	16,461,632	\$	8,019,135	•	81,017

Supporting Details

orting Details					
State Share			SFY 2011 23.13%	SFY 2012 23.60%	SFY 2013 23.95%
HMK-(formerly CHIP) PMPM Calculation					
176-250% New population	Total Estimated TPA & Service Costs Est. Enrollment	\$	18,290,407.00 7,824	\$ 31,267,235.00 12,841	\$ 33,090,477.00 12,841
Per Member Annual Cost	Per Member Annual Cost	\$		\$ 2,434.95	\$ 2,576.94
HMK-(formerly CHIP)					
Children under CHIP formerly was based on 17,240					
134-175% - Flat not elig. For I-155	Est. Enrollment		10,084	10,084	10,084
176-250% New population	Est. Enrollment		7,824	12,841	12,841
- - -		_	17,908	22,925	22,925
	Initiative Starting Count		17,240	17,240	17,240
	Estimated enrollment eligible for I-155		668.00	5,685.00	5,685.00
	Per Member Annual Cost	s	2,337.73	\$ 2,434.95	\$ 2,576.94
Est Elig for I-155 * per Member Annual Cost	Total Estimated Cost			\$ 13,842,709,37	
por received remitted cost	Estimated I-155 SSR Share	. \$		\$ 3,266,948.62	
Presumptive covers all 3 FPL groups 0-250% FPL	Est. Enrollment		829	2010	2,919
	Per Member Annual Cost	\$		2,919 \$ 2,434.95	•
	Total Estimated Cost	<u>\$</u>		\$ 7,107,628.61	
	Estimated I-155 SSR Share	\$		\$ 1,677,435.89	\$ 1,801,840.41
HMK-Medicald Expansion 101-133% FPL	Est. Enrollment		6,281	10,297	10,453
6-18 years old	Per Member Annual Cost	\$	•		•
- 10 Jame 014	Total Benefits		15,930,928.00	\$ 27,683,314.00	
	I-155 SSR		3,684,226.24	\$ 6,533,400.52	
Medicaid 0-100% FPL	I-155 SSR		13,529	6,785	6,516
Enrollment above the 46,711 Nov.1, 2008 date		28	1,910	1,935	1,985
	Total Benefits		25,835,004	13,128,383	12,934,641
Medicaid State Share			25.42%		23.95%
	I-155 SSR	-	6,567,257.89	3,098,364	3,098,364
	*** dp's to be adjusted			1,659,818	1,475,896
Admin	I-155 SSR	\$	1,233,391.00	\$ 711,255.00	\$ 709,924.00
Nurse First	I-155 SSR	\$	46,252.50	\$ 47,201.00	\$ 47,908.00
Extended Dental	I-155 SSR	\$	150,000.00	\$ 150,000.00	\$ 150,000.00
Parity & Prospective Payment	I 155 COD		04 922 22	f 100 504 55	
rains or riospective rayment	I-155 SSR	\$	94,833.35	\$ 102,584.77	\$ 111,877.64